

Commissioner

STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY

DIVISION OF FIRE STANDARDS & TRAINING &

EMERGENCY MEDICAL SERVICES

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Richard A. Mason Director

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TRAUMA MEDICAL REVIEW COMMITTEE

COMMITTEE MEETING

August 18, 2004
Richard M. Flynn Fire Academy
Concord, New Hampshire

Members Present: John Sutton, MD, Nick Mercuri, RN, EMTP, Michael Pepin, EMTP, Clare

Wilmot, MD

Guests: Janet Houston

Bureau Staff: Clay Odell, EMTP, RN, Fred von Recklinghausen, EMTP, Sue Prentiss,

EMTP, Bureau Chief, Rob Atwater, EMTP

I. Call to Order

Item 1. The June meeting of the Trauma Medical Review Committee was called to order by Dr. Sutton at 9:35 am on Wednesday August 18, 2004 at the Richard M. Flynn Fire Academy in Concord, NH.

Item 2. Dr. Sutton reported that he has received a letter from Dr. Richard Johnson submitting his resignation from the TMRC due to his impending retirement. Dr. Sutton recognized Dr. Johnson's extensive involvement in the TMRC for many years, providing his services voluntarily and sometimes putting aside his clinical duties and responsibilities with financial consequences simply to attend the TMRC meetings and stay involved. The TMRC appreciates all his efforts to help to get the trauma system established, especially in the Nashua area.

Clay also announced Sandy Hillsgrove's resignation from the TMRC following her retirement from Concord Fire Department. Sandy regularly participated in the TMRC meetings for several years representing the NH Fire Chief's Association and her efforts are noted and appreciated.

Sue Prentiss said that the NHBEMS will send certificates of appreciation to these individuals in recognition of their work on behalf of the NH Trauma System.

Sue also said that Dr. John Eppolito from Speare Memorial Hospital is putting his participation in the TMRC on hold while he is on a medical leave.

II. Acceptance of Minutes

Item 1. Minutes. The minutes of the June meeting were approved by email by all who attended that meeting, and were distributed by e-mail prior to this meeting. There was no discussion regarding the minutes.

III. Committee Discussion Items

Item 1. Renewal Process & Hospital Updates Clay reports that he has received the renewal application from Littleton Hospital after visiting with Kurt Lucas and Clare Wilmot to clarify what the TMRC was looking for in the application packet. As a result of that meeting a few minor changes in the wording of the application were changed. Clay also drafted a mock-up of a renewal application to assist with the process, which Littleton found helpful. Clay again expressed appreciation to Littleton for being a test subject for the process. Clay and Dr. Sutton will meet soon to review the application.

Clay passed a copy of the mock-up around the table for review.

Clay has been in contact with Southern NH Medical Center about their application. The process there has been slower than expected. The application has been discussed at meetings within the hospital and is now in the hands of the hospital's QI department. Due to lack of administrative help completing the application has been slow, but is expected to be done by the end of this week.

Clay anticipates proceeding with the renewal process with other hospitals in the NH Trauma System this fall.

Clay reports that Cottage Hospital is nearly ready to apply for Level III assignment. Clay has spoken to Cindy Fagnant, ED Manager who has been compiling information for the self-assessment tool. Clay will meet with her to review the materials and then work with Dr. Sutton to arrange a site visit.

Monadnock Community Hospital in Peterborough is proceeding with their selfassessment and have been communicating with Clay by email regarding clarification of specific requirements.

Clay also outlined his plans to offer a 30-minute presentation on current trends in pelvis trauma management. The presentation is geared toward ED staff and Clay is contacting ED Nurse Managers to asking if he can present the program at ED staff meetings. Dr. Sutton recommended contacting Jean Proehl at DHMC regarding an evaluation they conducted on a number of commercial pelvic binders. Dr. Clare Wilmot urged that surgeons and ED physicians be invited to the presentation as well.

Item 2. Legislative Advisory Clay discussed the legislative advocacy feature of the American College of Surgeons website. Federal legislation of interest to ACS members is discussed on the website, including trauma-related issues. The website features an easy way to send email to legislative representatives with suggested text that can be modified as desired by the user. You do not need to be a member of

ACS to use these features. While the NHBEMS is not taking a position on any issue at this time, it is important as trauma system leaders to engage in the political process and make legislators aware of your position. The website is www.facs.org and click on the "Advocacy" menu button.

Clay discussed the federal legislation to fund trauma system development for FY 2005. As discussed at the June meeting, the legislation funds the trauma program partially at the expense of eliminating direct funding of EMS for Children. Various professional groups have articulated their positions, but no change in the legislation has been made to date. Trauma leaders from NH are urged to consider the issue, take a position, and then make that position known to legislators.

NH Senate Bill 380 recently passed which establishes a requirement for emergency response agencies to utilize an incident command system (ICS). NHMEMS hopes to be involved in the rulemaking process.

Clay distributed a document discussing Senator Judd Gregg of NH's role in the passage of health related national legislation. Senator Gregg's position as Chair of the Senate Health, Education, Labor and Pensions Committee and his membership on the Senate Appropriations Committee are influential on a national scope. This is an important factor for NH trauma system leaders to keep in mind.

Item 3. Trauma Research & TEMSIS Fred von Recklinghausen reported that our abstract had been accepted by the New England Surgical Society for poster presentation at their annual meeting in October. Fred is currently working on that poster. He and Dr. Sutton will be available at the conference to discuss the poster. The poster will also be displayed at the NH Trauma System Conference in November.

The Committee discussed topics for the next research project. A consensus felt that examining transport issues was timely and needed. After considerable discussion initiated by Dr. Wilmot, a rudimentary research plan was formulated that the Bureau Research Section will refine. Step one of the plan will entail a search of available statewide data to examine transfer times. Step two will entail using that data to recruit hospitals to participate in a prospective study of transport times and issues.

Fred and Clay will work on this project and report progress at the October TMRC meeting, and will endeavor to have a poster presentation at the November NH Trauma Conference.

Fred gave the TEMSIS Update. The Request for Proposal (RFP) has gone out based on the criteria set by the TEMSIS Stakeholders Group. The state Office of Information Technology is facilitating the RFP and proposals from vendors are due back by Sept. 7, 2004. At the next TEMSIS meeting on Sept. 9th Dr. Donald Rice is giving a presentation at the NH Fire Academy. Dr. Rice recently assisted Nebraska through their TEMSIS project.

There are currently seven sites in NH that are piloting electronic documentation. Three different products are being used, EMS Charts, SweetSoft and ScanHealth. The project

appears to be going well with the anticipated learning curve. Derry FD, Swanzey Fire/Rescue, Diluzio Ambulance, Concord FD, Frisbie Memorial Hospital EMS, Weeks Hospital/Lancaster EMS and Colebrook Ambulance.

Another part of the TEMSIS project includes trauma triage & documentation training. Three train-the-trainer programs were held in various parts of the state, with Jackie Stocking coordinating that effort. Educational materials have been distributed to EMS Instructor Coordinators and are available on the NH EMS website. The 2005 fiscal year of the federal trauma grant will fund ten additional presentations, two per EMS Region. Sue Prentiss reports that confirmation of trauma grant funding was received yesterday.

Item 4. NH EMS Update Bureau Chief Sue Prentiss presented a report on Bureau activities. That report is attached to these minutes.

Sue reports the Rural AED Project placed 203 defibrillators and facilitated training for recipients this FY.

The radio interoperability project has been in a "holding pattern" in terms of the ambulance installation of dual head 255 frequency radios. That got held up with some of the Homeland Security funding concerns that were raised in the state by the Governor's Office. That seems to have resolved and is moving along once again.

Sue reported that the project to enable EMS providers to administer vaccinations is moving forward using HRSA grant funds. Training sites in each region have been identified, and efforts are underway to contract with medical oversight and nursing educators, as well as NHBEMS staff, to conduct classes to teach paramedics to administer vaccinations, conduct flu clinics, and participate in mass vaccination efforts in the event of bioterrorism, to supplement nursing and the public health network. Dr. Joe Sabato is the lead person on that project.

III. Old Business

Item 1.Committee Reappointments The NH Fire Chief's Association has been contacted regarding a replacement for Sandy Hillsgrove on the TMRC. Clay will contact SNHMC concerning a surgeon there who may be interested in TMRC membership.

Item 2. Air Medical Notification and Protocol Projects Monadnock Hospital has been sending Fred information concerning air medical scene flights utilizing prearrival notification. Information on about a half dozen flights has been received so far. The evaluation started June 1 and is for six months. There is no new information from the Capital Area Mutual Aid.

Clay reported that since the June TMRC meeting the draft of statewide standing orders for activation of air medical transport (AMT) from the scene was again presented to the Protocol Subcommittee and was approved. The AMT protocol was then discussed at the July Medical Control Board meeting and was approved. This protocol will be in the packet of new protocols that will be rolled out in January 2005. Clay will develop an

educational piece to go with this protocol in the roll-out. Copies of the approved protocol were distributed to the committee.

Item 3. Fall Trauma Conference The 2004 NH Trauma Conference is scheduled for November 10, 2005 at the Inns at Mill Falls in Meredith. "Save the Date" cards were mailed out. The title for this year's conference is "Partners in Performance", underlining the general theme of trauma performance improvement. Clay reported that a planning subcommittee meeting was held a few weeks ago. The subcommittee members are Nick Mercuri. Melissa Twomey, Sharon Phillips, Vicki Blanchard, Donna Clark, John Sutton and Clay Odell.

The sessions decided upon include "Performance Improvement in Action", a pragmatic approach to trauma performance improvement. The presenter we have secured is Connie Mattice, RN, past President of the Society of Trauma Nurses and current Program Director of the STN's "Trauma Outcomes and Performance Improvement Course".

Another issue to be discussed is critical care transport. There are areas throughout the state that frequently experience problems getting properly staffed transport services on a timely basis. This results in a delay in transferring seriously injured trauma patients to a higher level of care. Dr. Norm Dinerman, MD, Medical Director of Lifeflight of Maine has a considerable background in this field, and will help us explore solutions to the problem in NH.

The final report on the TEMSIS project will be a feature of the conference, as will breakout sessions related to disaster/MCI drills, resource shortages and trauma training program accessibility. Clay is working with Elliot Hospital for physician CME and with SNHMC for nursing contact hours.

IV. New Business

Item 1. EMS Trauma Course Comparison Sue Prentiss reported that funds from the federal trauma grant have been approved to underwrite conducting six trauma programs to EMS providers in the state. The programs will be offered at low cost in all five EMS regions. The Bureau of EMS tasked Rob Atwater with comparing the two major national trauma courses that are for EMS providers; Basic Trauma Life Support (BTLS) and Prehospital Trauma Life Support (PHTLS). Rob gave a presentation of his research. Based on the comparison the TMRC chose PHTLS as the program for the NHBEMS to support.

Refer to the attached PowerPoint presentation handout.

V. Public Comment

Clay advised the group that the Fire and EMS News was now the official newsletter of the Division of Fire Standards & Training and EMS. All TMRC members should be receiving the newsletter in the mail. Clay drew attention to the Summer 2004 issue which included an article on the Enhanced EMS Injury Prevention Program.

Clay also announced that the next meeting of the Hospital Trauma Coordinators Working Group would be held September 15, 2004 at the NH Fire Academy. Notice will be going out this week.

Finally Clay announced the 2004 North Country EMS Conference, October 15-17 in Bartlett. The conference will include presentations by NHBEMS staff, in particular Sue Prentiss' state of NH EMS presentation, and Clay's state of the NH Trauma System and injury prevention presentations. There are 27 presentations dealing with trauma or trauma-related issues. Dr. Richard Carmona, US Surgeon General is a keynote speaker.

VI. Adjournment

Dr. Sutton adjourned the meeting at 11:35. He advised the group that the next meeting of the Trauma Medical Review Committee will be held at the Richard M. Flynn Fire Academy on Wednesday October 20, 2004.